Vision Benefit Options

Auburn University

First search for your preferred provider or retail chain at vsp.com and eyemed.com. Then compare plan summaries and additional details to decide which plan is right for you.

VSP network

COSTCO OPTICAL · sam's club · Walmart · Visionworks · PEARLE VISION

Locations nationwide. VSP features the nation's largest network of independent doctors, with access to special offers at VSP Premier Edge locations.

Online shopping. Browse and buy eyewear online at eyeconic.com. It is in the VSP network and your in-network vision benefits are applied directly to your online order.

Glasses OR contacts in the same year. Your VSP benefits can be applied to contacts OR glasses during the benefit year. You will not receive an allowance for frames if you already chose to apply your vision benefits to contacts during the same benefit year.

EyeMed network

LENSCRAFTERS · PEARLE VISION · TARGET OPTICAL

Locations nationwide. EyeMed offers one of the largest vision networks in the nation with a mix of independent providers and retail chains.

Online shopping. Browse and buy eyewear online with network benefits. Vision benefits are applied directly to online orders at lenscrafters.com, targetoptical.com, rayban.com, oakley.com, glasses.com and contactsdirect.com.

Glasses AND contacts in the same year. If you use your lens benefits to purchase contacts, you are still able to use your frame allowance toward new glasses during the same benefit year. The eyeglass lenses to go in your new frames would be an out-of-pocket expense.

Visit any vision provider. You have the freedom to choose any vision provider. However, your benefit dollars go further when you visit a network provider, and they submit the claim for you. When visiting an out-of-network provider, pay the full balance and submit a claim with your itemized receipt for reimbursement based on your out-of-network plan benefits. **Visit vsp.com and eyemed.com to find a provider or see if yours is in-network.**

Sample out-of-pocket costs. The amounts below are samples only. Member cost is based on plan coverage but does not include deductible. The cost without insurance is estimated and uses the $200 national average frame cost. Actual charges vary.

Member Cost	Exam	Single vision lenses	Frames
Without insurance	$181	$98	$200
In-network	$10	$20	$16
Out-of-network	$136	$68	$130

Member Cost	Exam	Single vision lenses	Frames
Without insurance	$181	$98	$200
In-network	$10	$20	$16
Out-of-network	$146	$73	$110

Here to help

Once coverage begins, visit **ameritas.com** and create a member account to view plan information. Contact Ameritas for ID card or network questions. **group@ameritas.com | 800-487-5553**

For claims, benefit or network information:

Contact VSP at **800-877-7195**
Create a VSP account at **vsp.com**
Contact EyeMed at **866-289-0614**
Create an EyeMed account at **eyemed.com**

Scan the QR code to watch a benefits overview video.

Ameritas
fulfilling life.

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Vision plan benefits	VSP Choice Network		EyeMed Insight Network	
	In-network	Out-of-network	In-network	Out-of-network
Benefit frequencies				
Exam	Every **12** months		Every **12** months	
Eyeglass lenses or contacts	Every **12** months		Every **12** months	
Frames	Every **24** months		Every **24** months	
Deductible The amount you pay before benefits apply per person per calendar year	**$10** exam **$20** complete pair of glasses OR frames, whichever is selected		**$10** exam **$20** eyeglass lens	No deductible
Annual eye exam	**Covered in full**	Up to **$45**	**Covered in full**	Up to **$35**
Lenses				
Single vision	**Covered in full**	Up to **$30**	**Covered in full**	Up to **$25**
Bifocal	**Covered in full**	Up to **$50**	**Covered in full**	Up to **$40**
Trifocal	**Covered in full**	Up to **$65**	**Covered in full**	Up to **$55**
Lenticular	**Covered in full**	Up to **$100**	**Covered in full**	No coverage
Standard progressive	**Covered in full**	**Up to lined bifocal allowance**	**Covered in full**	No coverage
Frames	**$180***	Up to **$70**	**$180**	Up to **$90**
Elective contacts	Up to **$180**	Up to **$105**	Up to **$180**	Up to **$144**
Standard fit & follow-up exam	Member cost up to **$60**	No coverage	Member cost up to **$40**	No coverage
Prescription safety glasses	**Covered in lieu of regular eyeglasses or contacts; lens and frame allowances apply.**	No coverage	No coverage	No coverage

Essential Medical Program Receive coverage for additional exams and services beyond routine eye care to treat immediate issues from pink eye to sudden changes in vision, or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma and more. A retinal screening is free for members with diabetes. Additional exams are $20 per exam visit. Coordination with your medical coverage may apply. Ask your VSP doctor for details.

When you visit a network provider you get discounts on a variety of lens options. See member costs below.

	VSP Network*	EyeMed Network
Std. polycarbonate (impact-resistant)	$33 adult, $0 child	$40
Plastic solid tints & dyes (except pink I & II)	$15-$17	$15
Photochromatic (light-to-dark tinting)	$31-$82	$75
Scratch-resistant	$17-$33	$15
Standard anti-reflective (anti-glare)	$43-$85	$45
Ultraviolet	$16	$15

Additional savings		
Amount exceeding retail frame allowance	20% off	20% off
Additional prescription glasses	20%-30% off	20% off
Non-prescription sunglasses	20%-30% off	40% off
Lens enhancements	30%-40% off	No coverage
Additional savings	Select a featured frame brand and get an extra $20-$40 or more to spend	20% off non-covered materials, excluding lens upgrades
Contact lens	15% off remaining contact lens balance	No coverage
LASIK or PRK laser vision correction	15% average off retail, 5% off promotional price at VSP contracted facilities	15% average off retail, 5% off promotional price at EyeMed contracted facilities
Retinal screening	Member cost $39 or less	Member cost $39 or less

Based on applicable laws, reduced costs may vary by doctor location and material type. Costs are subject to change without notice.

*Not all providers at Costco, Walmart and Sam's Club locations are VSP network providers. Please verify that your provider is in the VSP network before seeking services.